

Handwritten notes:
 10-11-84
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**MULTIPLE DEPENDENT CLAIM
 FEE CALCULATION SHEET
 (FOR USE WITH FOR 1-875)**

SERIAL N. 1937596 FILING DATE 10/11/84
 APPLICANT(S) E

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT										
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51								
2							52								
3							53								
4							54								
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41							91								
42							92								
43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	2		8				TOTAL IND.								
TOTAL DEP.	11		6				TOTAL DEP.								
TOTAL CLAIMS	13		8				TOTAL CLAIMS								